

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼**

Example: If typing, type over the lines.

12FE4M5

JOE KAUFMAN FOR CONGRESS

ADDRESS (number and street)

2645 EXECUTIVE PARK DRIVE STE 512



Check if different than previously reported. (ACC)

WESTON

FL

33331

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00501205

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

FL

20

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2013

through

M M / D D / Y Y Y Y

09 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JOE KAUFMANSignature of Treasurer JOE KAUFMAN

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 28 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 33

Write or Type Committee Name

JOE KAUFMAN FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	33302.46	188840.26
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	33302.46	188840.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	34376.59	178873.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	34376.59	178873.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	29785.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	68616.60	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 33

Write or Type Committee Name

JOE KAUFMAN FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

5975.00

40312.00

(ii) Unitemized.....

27327.46

148528.26

(iii) TOTAL of contributions from individuals ▶

33302.46

188840.26

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

33302.46

188840.26

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

33302.46

188840.26

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 33

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	34376.59	178873.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	3800.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	3800.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	34376.59	182673.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	30859.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	33302.46
25. SUBTOTAL (add Line 23 and Line 24).....	64162.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	34376.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	29785.59

FOR LINE NUMBER:		PAGE 5 OF 33	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
JOE KAUFMAN FOR CONGRESS

Date of Receipt

MM / DD / YYYY

09 / 03 / 2013

Amount of Each Receipt this Period

50.00

Campaign Contribution

Date of Receipt

MM / DD / YYYY

08 / 02 / 2013

Amount of Each Receipt this Period

250.00

Campaign Contribution

Date of Receipt

MM / DD / YYYY

09 / 17 / 2013

Amount of Each Receipt this Period

100.00

Campaign Contribution

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

MRS CAROLINE E BOYD

Mailing Address 4424 CAROLINA HWY

City

DENMARK

State

SC

Zip Code

29042

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		18		2013

Transaction ID : SA11AI.34066

Amount of Each Receipt this Period

50.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

MS SUE M CANNON

Mailing Address 6420 W LAKERIDGE RD

City

LAKEWOOD

State

CO

Zip Code

80227

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2013

Transaction ID : SA11AI.35239

Amount of Each Receipt this Period

500.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

ELEANOR COBB

Mailing Address 131 S VISTA ST

City

LOS ANGELES

State

CA

Zip Code

90036

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		10		2013

Transaction ID : SA11AI.34144

Amount of Each Receipt this Period

200.00

Campaign Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

BETTY R. CRAWFORD

Mailing Address 601 ASPEN TRL

City

MUSCATINE

State

IA

Zip Code

52761

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2013

Transaction ID : SA11AI.35242

Amount of Each Receipt this Period

100.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

TIMOTHY J DEVANNEY

Mailing Address 70 PORTER ST

City

MANCHESTER

State

CT

Zip Code

06040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Highland Park Markets

Occupation

Grocer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2013

Transaction ID : SA11AI.34217

Amount of Each Receipt this Period

250.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

MR WAYNE DEWITT

Mailing Address 10816 SE EVERGREEN HWY

City

VANCOUVER

State

WA

Zip Code

98664

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2013

Transaction ID : SA11AI.34218

Amount of Each Receipt this Period

200.00

Campaign Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

GLADYS E. DOANE

A.

Mailing Address 3 BROADVIEW

City

KIRKSVILLE

State

MO

Zip Code

63501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fairland Cemetery, Inc.Occupation
Reg. Agent

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2013

Transaction ID : SA11AI.35243

Amount of Each Receipt this Period

50.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

MR JAMES DOIG

B.

Mailing Address 808 NE 102ND AVE

City

PORTLAND

State

OR

Zip Code

97220

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2013

Transaction ID : SA11AI.34232

Amount of Each Receipt this Period

50.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

JANE DOYLE

C.

Mailing Address 3172 HORSLEY MILL RD

City

CARROLLTON

State

GA

Zip Code

30116

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2013

Transaction ID : SA11AI.34240

Amount of Each Receipt this Period

420.00

Campaign Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

520.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

JANE G FLYNN**A.**

Mailing Address 1840 TICE CREEK DR APT 2105

APT 2105

City

WALNUT CREEK

State

CA

Zip Code

94595

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2013

Transaction ID : SA11AI.34288

Amount of Each Receipt this Period

100.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

Timothy James Flynn**B.**

Mailing Address 9609 W Bull Valley Road

City

Woodstock

State

IL

Zip Code

60123

FEC ID number of contributing
federal political committee.

C

Name of Employer

CDL

Occupation

Excutive

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2013

Transaction ID : SA11AI.33923

Amount of Each Receipt this Period

250.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

VICTORIA I FORD**C.**

Mailing Address 4303 FOREST PARK RD

City

JACKSONVILLE

State

FL

Zip Code

32210

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2013

Transaction ID : SA11AI.34293

Amount of Each Receipt this Period

250.00

Campaign Contribution

SUBTOTAL of Receipts This Page (optional).....

600.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 10 OF 33
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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 NAME OF COMMITTEE (In Full)
JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) MS JEAN HOWARD		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address 1307 QUAKER DR		Transaction ID : SA11AI.34445
City MCKINNEY	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer RETIRED	Occupation RETIRED	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 206.00	

Full Name (Last, First, Middle Initial) ORMON MAYNARD KEATHLEY		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2013
Mailing Address PO BOX 7470		Transaction ID : SA11AI.34502
City JACKSONVILLE	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer ?Ormon Enterprises, Inc.	Occupation President	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 270.00	

Full Name (Last, First, Middle Initial) MR LEONARD M KIRK		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address 6 HUNTER DR		Transaction ID : SA11AI.34526
City BEL AIR	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation RETIRED	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

CONCETTA KLIMKO

A.

Mailing Address 4006 WESLEY TER

City

SCHILLER PARK

State

IL

Zip Code

60176

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2013

Transaction ID : SA11AI.34534

Amount of Each Receipt this Period

50.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

MR ELDON LATHAM

B.

Mailing Address 1212 SUNNYSIDE DR

City

EUGENE

State

OR

Zip Code

97404

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2013

Transaction ID : SA11AI.34584

Amount of Each Receipt this Period

30.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

LORRAINE LOVELACE

C.

Mailing Address 4974 RIO VERDE DR

City

SAN JOSE

State

CA

Zip Code

95118

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOCIAL SERVICES

Occupation

Provider

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2013

Transaction ID : SA11AI.35256

Amount of Each Receipt this Period

100.00

Campaign Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

180.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 33

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
JOE KAUFMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) THOMAS J MACCARI			Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2013	
Mailing Address 1224 HETFIELD AVE			Transaction ID : SA11AI.35257	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
SCOTCH PLAINS	NJ	07076	Campaign Contribution	
FEC ID number of contributing federal political committee.		C		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
B. Full Name (Last, First, Middle Initial) ROBERT M MOHR			Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2013	
Mailing Address 16 VIEJO WAY			Transaction ID : SA11AI.34740	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
NOVATO	CA	94945	Campaign Contribution	
FEC ID number of contributing federal political committee.		C		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 360.00		
C. Full Name (Last, First, Middle Initial) MR RICHARD J MORRONI			Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2013	
Mailing Address 105 KRAMERIA ST			Transaction ID : SA11AI.34757	
City	State	Zip Code	Amount of Each Receipt this Period 250.00	
DENVER	CO	80220	Campaign Contribution	
FEC ID number of contributing federal political committee.		C		
Name of Employer ENGINEER		Occupation ENGINEER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....			450.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

PETER NEYHART

A.

Mailing Address 144 BEHREND'S AVE

City

JUNEAU

State

AK

Zip Code

99801

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2013

Transaction ID : SA11AI.34793

Amount of Each Receipt this Period

500.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

MRS EDITH M NOWICKI TRUSTEE

B.

Mailing Address 20 DEWEY ST

City

SAINT PAUL

State

MN

Zip Code

55104

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2013

Transaction ID : SA11AI.34805

Amount of Each Receipt this Period

75.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

MS THELMA RICE

C.

Mailing Address 334 CEDARDALE DR SE

City

OWATONNA

State

MN

Zip Code

55060

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2013

Transaction ID : SA11AI.34912

Amount of Each Receipt this Period

1000.00

Campaign Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1575.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

PEGGY SAUER

A.

Mailing Address 3100 EDWARD ST NE

City

MINNEAPOLIS

State

MN

Zip Code

55418

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2013

Transaction ID : SA11AI.34958

Amount of Each Receipt this Period

50.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

Mr. Ramsay Simmons Jr.

B.

Mailing Address P.O Box 760

City

Bainbridge

State

GA

Zip Code

39818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Investments

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 02 / 2013

Transaction ID : SA11AI.35264

Amount of Each Receipt this Period

250.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

Ellen Zyroff

C.

Mailing Address 7361 Rue Michael

City

La Jolla

State

CA

Zip Code

92037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 06 / 2013

Transaction ID : SA11AI.35271

Amount of Each Receipt this Period

250.00

Campaign Contribution

SUBTOTAL of Receipts This Page (optional).....

550.00

TOTAL This Period (last page this line number only).....

5975.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 33

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MIAMI DOLPHINS

Mailing Address 347 Don Shula Dr,

City	State	Zip Code
Miami Gardens	FL	33056

Purpose of Disbursement
Miami Jewish Comm Event

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2013

Amount of Each Disbursement this Period

210.50

Transaction ID : SB17.35341

B. BASE CONNECT, INC.Mailing Address 1155 15th St NW
STE 410

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Direct Mail Prog :Creative Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2013

Amount of Each Disbursement this Period

4270.99

Transaction ID : SB17.35272

C. CENTURY DATA MAILING SERVICEMailing Address 1155 15th St NW
STE 410

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Direct Mail Prog:Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		05		2013

Amount of Each Disbursement this Period

3901.61

Transaction ID : SB17.35273

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8383.10

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 33

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICE

Mailing Address 1155 15th St NW
STE 410

City Washington State DC Zip Code 20005

Purpose of Disbursement
Direct Mail Prog:Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 26 / 2013

Amount of Each Disbursement this Period

6476.26

Transaction ID : SB17.35274

Category/
Type

Full Name (Last, First, Middle Initial)

B. COLORTREE GROUP

Mailing Address PO BOX 28960

City HENRICO State VA Zip Code 23228

Purpose of Disbursement
Dir Mail Prog:Printing/Mailshop

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 12 / 2013

Amount of Each Disbursement this Period

8490.39

Transaction ID : SB17.35275

Category/
Type

Full Name (Last, First, Middle Initial)

C. COLORTREE GROUP

Mailing Address PO BOX 28960

City HENRICO State VA Zip Code 23228

Purpose of Disbursement
Dir Mail Prog:Printing/Mailshop

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 26 / 2013

Amount of Each Disbursement this Period

237.80

Transaction ID : SB17.35276

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

15204.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 33

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Defending the Dream EventbriteMailing Address 2111 Wilson Blvd,
STE 350

City Arlington State VA Zip Code 22201

Purpose of Disbursement
convention tickets

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		08		2013

Amount of Each Disbursement this Period

218.01

Transaction ID : SB17.35314

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 Random Hills Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Indirect Prog Exp:Bank Charges

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2013

Amount of Each Disbursement this Period

66.26

Transaction ID : SB17.35277

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 Random Hills Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Indirect Prog Exp:Bank Charges

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2013

Amount of Each Disbursement this Period

76.30

Transaction ID : SB17.35278

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

360.57

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 33

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 Random Hills Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement
Indirect Prog Exp:Bank Charges

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		27		2013

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.35282

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 Random Hills Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement
Indirect Prog Exp:Bank Charges

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2013

Amount of Each Disbursement this Period

28.32

Transaction ID : SB17.35283

C. INTEGRAM

Mailing Address 22695 Commerce Center Court

City	State	Zip Code
Dulles	VA	20166

Purpose of Disbursement
Dir Mail Prog:Printing/Mailshop

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2013

Amount of Each Disbursement this Period

2494.79

Transaction ID : SB17.35284

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2531.06

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 33

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LAKESIDE EXECUTIVE SUITEMailing Address 2645 Executive Park Dr.,
STE 512

City Weston State FL Zip Code 33331

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2013

Amount of Each Disbursement this Period

101.76

Transaction ID : SB17.35294

B. LAKESIDE EXECUTIVE SUITEMailing Address 2645 Executive Park Dr.,
STE 512

City Weston State FL Zip Code 33331

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		08		2013

Amount of Each Disbursement this Period

101.76

Transaction ID : SB17.35315

C. LEGACY LISTS, INC. - BROKERAGEMailing Address 1155 15th St NW
STE 410

City Washington State FL Zip Code 20005

Purpose of Disbursement
Direct Mail Prog:List Rental Exp

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2013

Amount of Each Disbursement this Period

685.01

Transaction ID : SB17.35285

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

888.53

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 33

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LEGACY LISTS, INC. - BROKERAGEMailing Address 1155 15th St NW
STE 410

City Washington State FL Zip Code 20005

Purpose of Disbursement
Direct Mail Prog:List Rental Exp

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2013

Amount of Each Disbursement this Period

3610.96

Transaction ID : SB17.35286

B. Loews Hotels Royal Paci Orlando

Mailing Address 6300 Hollywood Way

City Orlando State FL Zip Code 32819

Purpose of Disbursement
convention tickets

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2013

Amount of Each Disbursement this Period

204.75

Transaction ID : SB17.35303

c. Postage cash deposit

Mailing Address 3350 NE 12th Ave

City Oakland Park State FL Zip Code 33351

Purpose of Disbursement
Postage Deposit

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		12		2013

Amount of Each Disbursement this Period

300.01

Transaction ID : SB17.35300

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4115.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 33

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3350 NE 12th Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2013

City	State	Zip Code
Oakland Park	FL	33351

Amount of Each Disbursement this Period

300.01

Purpose of Disbursement
Postage Permit

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Transaction ID : SB17.35293

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 3350 NE 12th Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		12		2013

City	State	Zip Code
Oakland Park	FL	33351

Amount of Each Disbursement this Period

300.01

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Transaction ID : SB17.35301

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 3350 NE 12th Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2013

City	State	Zip Code
Oakland Park	FL	33351

Amount of Each Disbursement this Period

500.01

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Transaction ID : SB17.35311**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1100.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 33

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3350 NE 12th Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2013

City	State	Zip Code
Oakland Park	FL	33351

Amount of Each Disbursement this Period

90.01

Purpose of Disbursement
Postage Permit

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Transaction ID : SB17.35318

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 3350 NE 12th Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2013

City	State	Zip Code
Oakland Park	FL	33351

Amount of Each Disbursement this Period

200.01

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Transaction ID : SB17.35352

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

290.02

32977.25

SCHEDULE C (FEC Form 3)
LOANS

PAGE 24 OF 33

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5512

JOE KAUFMAN FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2012

JOE KAUFMAN☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE
STE 512

City

State

ZIP Code

WESTON

FL

33331

Original Amount of Loan

3248.21

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3248.21

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 01 / 2011

Date Due

M M / D D / Y Y Y Y
Upon Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3248.21

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 25 OF 33

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.9126

JOE KAUFMAN FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2012

JOE KAUFMAN☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE
STE 512

City

State

ZIP Code

WESTON

FL

33331

Original Amount of Loan

5000.00

Cumulative Payment To Date

3800.00

Balance Outstanding at Close of This Period

1200.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 31 / 2011

Date Due

M M / D D / Y Y Y Y
Upon Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1200.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 26 OF 33

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.20680

JOE KAUFMAN FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2012

JOE KAUFMAN☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

State

ZIP Code

WESTON

FL

33331

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 20 / 2012

Date Due

M M / D D / Y Y Y Y
Upon Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 27 OF 33

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22542

JOE KAUFMAN FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2012

JOE KAUFMAN☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

State

ZIP Code

WESTON

FL

33331

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 05 / 2012

Date Due

M M / D D / Y Y Y Y
Upon Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 28 OF 33

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22543

JOE KAUFMAN FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2012

JOE KAUFMAN☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

State

ZIP Code

WESTON

FL

33331

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 13 / 2012

Date Due

M M / D D / Y Y Y Y
Upon Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 29 OF 33

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22544

JOE KAUFMAN FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2012

JOE KAUFMAN☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

State

ZIP Code

WESTON

FL

33331

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 16 / 2012

Date Due

M M / D D / Y Y Y Y
Upon Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 33

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.26611

JOE KAUFMAN FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2012

JOE KAUFMAN☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

State

ZIP Code

WESTON

FL

33331

Original Amount of Loan

3200.00

Cumulative Payment To Date

823.50

Balance Outstanding at Close of This Period

2376.50

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 15 / 2012

Date Due

M M / D D / Y Y Y Y
Upon Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2376.50

TOTALS This Period (last page in this line only)..... ►

18324.71

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 31 OF 33

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BASE CONNECT, INC.

Nature of Debt (Purpose):

Direct Mail Creative Fees

Mailing Address 1155 15th St NW
STE 410City State Zip Code
Washington DC 20005

Outstanding Balance Beginning This Period

20235.44

Transaction ID : SD10.33907

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20235.44

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CENTURY DATA SYSTEMS CORP

Nature of Debt (Purpose):

Direct Mail Program Postage

Mailing Address 1155 - 15TH STREET, NW

City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

6552.89

Transaction ID : SD10.33908

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6552.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DIRECT MAIL PROCESSORS, INC.

Nature of Debt (Purpose):

Direct Mail Program Postage

Mailing Address 2976 Penwick Lane

City State Zip Code
Dunkirk MD 20754

Outstanding Balance Beginning This Period

102.55

Transaction ID : SD10.33909

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

102.55

1) **SUBTOTALS** This Period This Page (optional) ▶

26890.88

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 32 OF 33

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

INTEGRAM

Nature of Debt (Purpose):

Direct Mail Program Printing & Mailshop

Mailing Address 22695 Commerce Center Court

City State

Zip Code

Dulles

VA

20166

Outstanding Balance Beginning This Period

10210.45

Transaction ID : SD10.33910

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10210.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LEGACY LISTS, INC. - BROKERAGE

Nature of Debt (Purpose):

Direct Mail List Rental

Mailing Address 1155 - 15TH STREET, NW
SUITE 410

City State

Zip Code

WASHINGTON

DC

20005

Outstanding Balance Beginning This Period

6327.81

Transaction ID : SD10.33911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6327.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LEGACY LISTS, INC. - MANAGEMENT

Nature of Debt (Purpose):

Direct Mail List Management

Mailing Address 1155 15th St NW

City

State

Zip Code

Washington

FL

20005

Outstanding Balance Beginning This Period

6769.75

Transaction ID : SD10.33912

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6769.75

1) **SUBTOTALS** This Period This Page (optional) ▶

23308.01

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 33 OF 33

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SIMPKINS ESCROW LLC

Nature of Debt (Purpose):

Indirect Prog Exp Caging & Escrow

Mailing Address 29243 St Just Dr

City State

Zip Code

UNIONVILLE

VA

22567

Outstanding Balance Beginning This Period

93.00

Transaction ID : SD10.33913

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

93.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

93.00

2) **TOTALS** This Period (last page this line number only) ▶

50291.89

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

18324.71

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

68616.60